

# Illinois Master Naturalist



**I ILLINOIS EXTENSION**  
COLLEGE OF AGRICULTURAL, CONSUMER  
& ENVIRONMENTAL SCIENCES

## Photo, Video and Audio Release

I grant the University of Illinois, including its Extension program, the permission to record and/or disclose my identity, including, but not limited to, photograph, image, likeness, and voice (“Identity”), and to use, reproduce and distribute video and/or sound recordings, films, photographs, transparencies or other recordings of me arising out of

### Master Naturalist Program

---

Program and/or Activity

Such use, reproduction and distribution may be done in whole or in part in any media for any purpose on behalf of the University and its Extension, such as in Extension publications, webpages, social media or to otherwise promote Extension programs as in posters, audio/video presentations or other displays. My Identity may also be released to local news media to be used in connection with reporting on, promoting, or otherwise publicizing Extension programs.

In addition, I waive all claims to compensation or damages based on the use by the University of my Identity. I also waive any right to inspect or approve the finished photograph, video or audio recording, or other recording.

I understand that this release is perpetual, that I may not revoke it, and that it is binding on me, my heirs and assigns.

I warrant that I have the full right and authority to grant this release and that I am at least 19 years of age. I further attest that I have read this release form and fully understand its contents.

---

Name of Subject

---

Subjects Signature

---

Address

---

Date

---

City

State

Zip